

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

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|---|---|
| 1. File Number U - <u>13180</u> | 2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u> |
| 3. Name and address of person filing. Name <u>Calvin</u> <u>J</u> <u>McKinnis</u> P.O. Box, Bldg., Room No., if any _____ Street <u>37551 SE Highway 211</u> City <u>Sandy</u> State <u>Oregon</u> ZIP Code + 4 <u>97055</u> | 4. Name, file number, and address of labor organization. Name <u>Plasterer's Union Local #82</u> Labor Organization File Number <u>035-053</u> P.O. Box, Building and Room Number, if any _____ Street <u>12812 NE Marx Street</u> City <u>Portland</u> State <u>Oregon</u> ZIP Code + 4 <u>97230</u> |
| 5. Position in labor organization. <u>Business Manager</u> | |

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

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|--|--|
| A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. | |
| 6. Name and address of Employer (including trade name, if any). Name _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____ | 7.a. Nature of Interest, Transaction, or Income. _____ 7.b. Amount. _____ |

Signature

| | | |
|--|---------------------------|---|
| 15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.) | | |
| Signed <u>[Signature]</u> | On <u>7/10/05</u> Date | <u>503 668-5027</u> Telephone Number |

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Plasterer's Local #82 Pension Trust

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 12812 NE Marx Street

City Portland

State Oregon ZIP Code + 4 97230

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

Trust fund receives contributions under the Collective Bargaining Agreement.

11.b. Approximate dollar value of such dealing.

\$600,613

12.a. Nature of interest held or income received.

Meal Expense for attending trustees meeting

12.b. Amount.

\$9

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

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|--|----------------|
| Name of Person Filing CALVIN MCKINNIS | File Number U- |
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

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| 8. Name and address of Business (including trade name, if any). Name <input style="width: 80%;" type="text" value="Employer Plasterer's Trust"/> Trade Name, if any: <input style="width: 80%;" type="text"/> P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/> Street <input style="width: 80%;" type="text" value="12812 NE Marx Street"/> City <input style="width: 80%;" type="text" value="Portland,"/> State <input style="width: 20%;" type="text" value="Oregon"/> ZIP Code + 4 <input style="width: 20%;" type="text" value="97230"/> | 9. Business deals with: <input checked="" type="checkbox"/> a. Labor Organization <input type="checkbox"/> b. Trust <input type="checkbox"/> c. Employer |
| 10. If 9.b. or 9.c. is checked give trust or employer's name. Name <input style="width: 80%;" type="text"/> Trade Name, if any: <input style="width: 80%;" type="text"/> P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/> Street <input style="width: 80%;" type="text"/> City <input style="width: 80%;" type="text"/> State <input style="width: 20%;" type="text"/> ZIP Code + 4 <input style="width: 20%;" type="text"/> | 11.a. Nature of such dealing. <div style="border: 1px solid black; padding: 5px; min-height: 80px;">Trust fund receives contributions under the Collective Bargaining Agreement</div> 11.b. Approximate dollar value of such dealing. <input style="width: 100px;" type="text" value="\$825,661"/> |
| Street <input style="width: 80%;" type="text"/> City <input style="width: 80%;" type="text"/> State <input style="width: 20%;" type="text"/> ZIP Code + 4 <input style="width: 20%;" type="text"/> | 12.a. Nature of interest held or income received. <div style="border: 1px solid black; padding: 5px; min-height: 100px;">Meal Expense for attending trustees meeting.</div> 12.b. Amount. <input style="width: 100px;" type="text" value="\$8"/> |

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| C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value. | |
| 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name <input style="width: 80%;" type="text"/> Trade Name, if any: <input style="width: 80%;" type="text"/> P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/> Street <input style="width: 80%;" type="text"/> City <input style="width: 80%;" type="text"/> State <input style="width: 20%;" type="text"/> ZIP Code + 4 <input style="width: 20%;" type="text"/> | 14.a. Nature of payment. <div style="border: 1px solid black; height: 150px;"></div> |
| 13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ? | 14.b. Amount of payment. <input style="width: 100px;" type="text"/> |

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| Name of Person Filing Calvin McKinnis, II | File Number U- |
|--|----------------|

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

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| <p>8. Name and address of Business (including trade name, if any).</p> <p>Name <input type="text" value="Employers #82 JATC OR SW WA"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text" value="12812 NE Marx Street"/></p> <p>City <input type="text" value="Portland"/></p> <p>State <input type="text" value="Oregon"/> ZIP Code + 4 <input type="text" value="97230"/></p> | <p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p> |
| <p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p> | <p>11.a. Nature of such dealing.</p> <div style="border: 1px solid black; padding: 5px; min-height: 80px;"> Trust Fund receiving contributions under Collective Bargaining Agreement </div> <p>11.b. Approximate dollar value of such dealing. <input type="text" value="\$75,525"/></p> <p>12.a. Nature of interest held or income received.</p> <div style="border: 1px solid black; padding: 5px; min-height: 100px;"> Meal Expense for Business Meetings </div> <p>12.b. Amount. <input type="text" value="\$72"/></p> |

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

| | |
|--|---|
| <p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p> | <p>14.a. Nature of payment.</p> <div style="border: 1px solid black; height: 150px;"></div> |
| <p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p> | <p>14.b. Amount of payment. <input type="text"/></p> |

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Employers #82 JATC OR SW WA

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 12812 NE Marx Street

City Portland

State Oregon

ZIP Code + 4 97230

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

Trust Fund receiving contributions under Collective Bargaining Agreement

11.b. Approximate dollar value of such dealing.

\$75,525

12.a. Nature of interest held or income received.

Instructor Wages

12.b. Amount.

\$6,077

Name of Person Filing Calvin McKinnis, II

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Employers #82 JATC OR SW WA

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 12812 NE Marx Street

City Portland

State Oregon ZIP Code + 4 97230

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

Trust Fund receiving contributions under Collective Bargaining Agreement

11.b. Approximate dollar value of such dealing.

\$75,525

12.a. Nature of interest held or income received.

Reimbursement for Class Expense

12.b. Amount.

\$24

Name of Person Filing Calvin McKinnis, II

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Access Dental

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 10117 SE Sunnyside Road, Suite F405

City Clackamas

State Oregon ZIP Code + 4 97015

9. Business deals with:

☐ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

Dental Network

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Meals and Beverage for business meeting.

12.b. Amount.

\$11